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## \*BIBDATASHEET\*

CONFIRMATION NO. 2127

Bib Data Sheet

<b>SERIAL NUMBER</b> 09/614,270	<b>FILING OR 371(c) DATE</b> 07/12/2000 <b>RULE</b>	<b>CLASS</b> 705	<b>GROUP ART UNIT</b> 3624	<b>ATTORNEY DOCKET NO.</b> 11348.36US01
<b>APPLICANTS</b> William A. Cooper, Wayzata, MN; <b>** CONTINUING DATA</b> <i>Verified &amp; C</i> <b>** FOREIGN APPLICATIONS</b> <i>Verified &amp; C</i>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 09/12/2000</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>R. Crawford</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> MN	<b>SHEETS DRAWING</b> 5	<b>TOTAL CLAIMS</b> 44
			<b>INDEPENDENT CLAIMS</b> 10	
<b>ADDRESS</b> Robert J. Crawford Crawford Mauni PLLC 1270 Northland Drive, Ste. 390 St. Paul, MN 55210				
<b>TITLE</b> Debit card billing system				
<b>FILING FEE RECEIVED</b> 1668	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	